

**IN THE UNITED STATES BANKRUPTCY COURT
FOR THE MIDDLE DISTRICT OF GEORGIA**

IN RE: :
: CHAPTER 11
CORNERSTONE BAPTIST CHURCH OF MACON, INC., :
: CASE NO. 11-51573
Debtor :

DEBTOR'S MONTHLY OPERATING REPORT

for the period

from March 1, 2012 to March 31, 2012

COMES NOW the above-named Debtor and files its Monthly Operating Report in accordance with the Guidelines established by the United States Trustee and Bankruptcy Rule 2015.



WESLEY J. BOYER

Debtor's address & phone number:
Attention: Rev. Michael Blizzard
5399 Hartley Bridge Road
Macon, GA 31216

Attorney's address & phone number:
355 Cotton Avenue
Macon, GA 31201
(478) 742-6481

B 25C (Official Form 25C) (12/08)

UNITED STATES BANKRUPTCY COURT

In re Cornerstone Baptist Church of Macon Inc.
Debtor

Case No. 11-51573

Small Business Case under Chapter 11

SMALL BUSINESS MONTHLY OPERATING REPORT

Month: March 2012

Date filed: 04/15/2012

Line of Business: Church

NAISC Code: 236220

IN ACCORDANCE WITH TITLE 28, SECTION 1746, OF THE UNITED STATES CODE, I DECLARE UNDER PENALTY OF PERJURY THAT I HAVE EXAMINED THE FOLLOWING SMALL BUSINESS MONTHLY OPERATING REPORT AND THE ACCOMPANYING ATTACHMENTS AND, TO THE BEST OF MY KNOWLEDGE, THESE DOCUMENTS ARE TRUE, CORRECT AND COMPLETE.

RESPONSIBLE PARTY:


Original Signature of Responsible Party

Charles Michael Blizzard-Cornerstone Baptist Church of Macon, Inc.

Printed Name of Responsible Party

Questionnaire: (All questions to be answered on behalf of the debtor.)

	Yes	No
1. IS THE BUSINESS STILL OPERATING?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2. HAVE YOU PAID ALL YOUR BILLS ON TIME THIS MONTH?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3. DID YOU PAY YOUR EMPLOYEES ON TIME?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
4. HAVE YOU DEPOSITED ALL THE RECEIPTS FOR YOUR BUSINESS INTO THE DIP ACCOUNT THIS MONTH?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
5. HAVE YOU FILED ALL OF YOUR TAX RETURNS AND PAID ALL OF YOUR TAXES THIS MONTH?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6. HAVE YOU TIMELY FILED ALL OTHER REQUIRED GOVERNMENT FILINGS?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
7. HAVE YOU PAID ALL OF YOUR INSURANCE PREMIUMS THIS MONTH?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
8. DO YOU PLAN TO CONTINUE TO OPERATE THE BUSINESS NEXT MONTH?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
9. ARE YOU CURRENT ON YOUR QUARTERLY FEE PAYMENT TO THE U.S. TRUSTEE?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
10. HAVE YOU PAID ANYTHING TO YOUR ATTORNEY OR OTHER PROFESSIONALS THIS MONTH?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
11. DID YOU HAVE ANY UNUSUAL OR SIGNIFICANT UNANTICIPATED EXPENSES THIS MONTH?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
12. HAS THE BUSINESS SOLD ANY GOODS OR PROVIDED SERVICES OR TRANSFERRED ANY ASSETS TO ANY BUSINESS RELATED TO THE DIP IN ANY WAY?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
13. DO YOU HAVE ANY BANK ACCOUNTS OPEN OTHER THAN THE DIP ACCOUNT?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

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B 25C (Official Form 25C) (12/08)

- | | | |
|---|--------------------------|-------------------------------------|
| 14. HAVE YOU SOLD ANY ASSETS OTHER THAN INVENTORY THIS MONTH? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 15. DID ANY INSURANCE COMPANY CANCEL YOUR POLICY THIS MONTH? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 16. HAVE YOU BORROWED MONEY FROM ANYONE THIS MONTH? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 17. HAS ANYONE MADE AN INVESTMENT IN YOUR BUSINESS THIS MONTH? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 18. HAVE YOU PAID ANY BILLS YOU OWED BEFORE YOU FILED BANKRUPTCY? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |

TAXES

DO YOU HAVE ANY PAST DUE TAX RETURNS OR PAST DUE POST-PETITION TAX OBLIGATIONS? ☐ ☒

IF YES, PLEASE PROVIDE A WRITTEN EXPLANATION INCLUDING WHEN SUCH RETURNS WILL BE FILED, OR WHEN SUCH PAYMENTS WILL BE MADE AND THE SOURCE OF THE FUNDS FOR THE PAYMENT.

(Exhibit A)

INCOME

PLEASE SEPARATELY LIST ALL OF THE INCOME YOU RECEIVED FOR THE MONTH. THE LIST SHOULD INCLUDE ALL INCOME FROM CASH AND CREDIT TRANSACTIONS. (THE U.S. TRUSTEE MAY WAIVE THIS REQUIREMENT.)

TOTAL INCOME \$ 7,662.84

SUMMARY OF CASH ON HAND

Cash on Hand at Start of Month	\$ <u>80.38</u>
Cash on Hand at End of Month	\$ <u>199.18</u>

PLEASE PROVIDE THE TOTAL AMOUNT OF CASH CURRENTLY AVAILABLE TO YOU TOTAL \$ 52.09

(Exhibit B)

EXPENSES

PLEASE SEPARATELY LIST ALL EXPENSES PAID BY CASH OR BY CHECK FROM YOUR BANK ACCOUNTS THIS MONTH. INCLUDE THE DATE PAID, WHO WAS PAID THE MONEY, THE PURPOSE AND THE AMOUNT. (THE U.S. TRUSTEE MAY WAIVE THIS REQUIREMENT.)

TOTAL EXPENSES \$ 7,721.82

(Exhibit C)

CASH PROFIT

INCOME FOR THE MONTH (TOTAL FROM EXHIBIT B) \$ 7,662.84

EXPENSES FOR THE MONTH (TOTAL FROM EXHIBIT C) \$ 6,902.24

(Subtract Line C from Line B)

CASH PROFIT FOR THE MONTH \$ 760.60

B 25C (Official Form 25C) (12/08)

UNPAID BILLS

PLEASE ATTACH A LIST OF ALL DEBTS (INCLUDING TAXES) WHICH YOU HAVE INCURRED SINCE THE DATE YOU FILED BANKRUPTCY BUT HAVE NOT PAID. THE LIST MUST INCLUDE THE DATE THE DEBT WAS INCURRED, WHO IS OWED THE MONEY, THE PURPOSE OF THE DEBT AND WHEN THE DEBT IS DUE. *(THE U.S. TRUSTEE MAY WAIVE THIS REQUIREMENT.)*

TOTAL PAYABLES \$ 0.00

(Exhibit D)

MONEY OWED TO YOU

PLEASE ATTACH A LIST OF ALL AMOUNTS OWED TO YOU BY YOUR CUSTOMERS FOR WORK YOU HAVE DONE OR THE MERCHANDISE YOU HAVE SOLD. YOU SHOULD INCLUDE WHO OWES YOU MONEY, HOW MUCH IS OWED AND WHEN IS PAYMENT DUE. *(THE U.S. TRUSTEE MAY WAIVE THIS REQUIREMENT.)*

TOTAL RECEIVABLES \$ 0.00

(Exhibit E)

BANKING INFORMATION

PLEASE ATTACH A COPY OF YOUR LATEST BANK STATEMENT FOR EVERY ACCOUNT YOU HAVE AS OF THE DATE OF THIS FINANCIAL REPORT OR HAD DURING THE PERIOD COVERED BY THIS REPORT.

(Exhibit F)

EMPLOYEES

NUMBER OF EMPLOYEES WHEN THE CASE WAS FILED? 3
NUMBER OF EMPLOYEES AS OF THE DATE OF THIS MONTHLY REPORT? 3

PROFESSIONAL FEES

BANKRUPTCY RELATED:

PROFESSIONAL FEES RELATING TO THE BANKRUPTCY CASE PAID DURING THIS REPORTING PERIOD? \$ 0.00

TOTAL PROFESSIONAL FEES RELATING TO THE BANKRUPTCY CASE PAID SINCE THE FILING OF THE CASE? \$ 6,905.50

NON-BANKRUPTCY RELATED:

PROFESSIONAL FEES NOT RELATING TO THE BANKRUPTCY CASE PAID DURING THIS REPORTING PERIOD? \$ 0.00

TOTAL PROFESSIONAL FEES NOT RELATING TO THE BANKRUPTCY CASE PAID SINCE THE FILING OF THE CASE? \$ 0.00

B 25C (Official Form 25C) (12/08)

PROJECTIONS

COMPARE YOUR ACTUAL INCOME AND EXPENSES TO THE PROJECTIONS FOR THE FIRST 180 DAYS OF YOUR CASE PROVIDED AT THE INITIAL DEBTOR INTERVIEW.

	Projected	Actual	Difference
INCOME	\$ _____	\$ 86,875.08	\$ _____
EXPENSES	\$ _____	\$ 85,410.94	\$ _____
CASH PROFIT	\$ _____	\$ 1,464.14	\$ _____

TOTAL PROJECTED INCOME FOR THE NEXT MONTH:	\$ 10,000.00
TOTAL PROJECTED EXPENSES FOR THE NEXT MONTH:	\$ 10,000.00
TOTAL PROJECTED CASH PROFIT FOR THE NEXT MONTH:	\$ 0.00

ADDITIONAL INFORMATION

PLEASE ATTACH ALL FINANCIAL REPORTS INCLUDING AN INCOME STATEMENT AND BALANCE SHEET WHICH YOU PREPARE INTERNALLY.

Case Name: Cornerstone Baptist Church of Macon, Inc.
Case #: 11-51573

Small Business Monthly Operating Report
Exhibit B

March 2012

Income

Date	Amount
3/4/2012	\$ 3,131.00
3/11/2012	\$ 1,627.00
3/18/2012	\$ 1,539.84
3/20/2012	\$ 250.00
3/25/2012	\$ 1,115.00

Total **\$ 7,662.84**

Case Name: Cornerstone Baptist Church of Macon, Inc.
Case #: 11-51573

Small Business Monthly Operating Report
Exhibit C

March 2012

Expenses

Date	Amount
3/4/2012	\$ 29.52
3/4/2012	\$ 350.00
3/4/2012	\$ 375.00
3/4/2012	\$ 1,000.00
3/4/2012	\$ 1,079.72
3/11/2012	\$ 1,000.00
3/11/2012	\$ 21.95
3/11/2012	\$ 45.86
3/11/2012	\$ 99.39
3/16/2012	\$ 55.00
3/18/2012	\$ 32.75
3/18/2012	\$ 1,000.00
3/21/2012	\$ 227.32
3/18/2012	\$ 388.05
3/21/2012	\$ 100.00
3/25/2012	\$1,000.00
3/25/2012	\$ 97.68

Total \$ 6,902.24

Case Name: Cornerstone Baptist Church of Macon, Inc.
Case #: 11-51573

Small Business Monthly Operating Report
Exhibit D

March 2012

Unpaid Bills Since Bankruptcy Filed
None as of March 31th
with exception of salaries



e|statement

Capital City Bank OnLine

A Home Equity Line of Credit provides the money needed when insurance or emergency funds aren't enough to handle the unexpected. Apply today and, once approved, access this cash-up to available credit limit-when you need it most. www.ccbg.com

CORNERSTONE BAPTIST CHURCH OF MACON, INC
 OPERATING ACCOUNT
 P O BOX 3296
 MACON GA 31205-3296

Date 3/30/12
 Primary Account

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 XXXXXX1601

CHECKING ACCOUNT

ABSOLUTELY FREE BUSINESS CKING	Images	15
Account Number XXXXXX1601	Statement Dates	3/01/12 thru 4/01/12
Previous Balance 1,024.88	Days in this Statement Period	32
5 Deposits/Credits 7,662.84	Avg Ledger Balance	995.97
19 Checks/Debits 7,949.14	Avg Collected Balance	795.35
Service Charges .00		
Interest Paid .00		
Ending Balance 738.58		

DEPOSITS AND OTHER CREDITS

Date	Description	Amount
3/05	DEPOSIT	3,131.00
3/12	DEPOSIT	1,627.00
3/19	DEPOSIT	1,539.84
3/22	DEPOSIT	250.00
3/26	DEPOSIT	1,115.00

OTHER DEBITS

Date	Description	Amount
3/01	PRIMERICA LIFE INS. PREM PPD	227.32-



e|statement

Capital City Bank OnLine

CORNERSTONE BAPTIST CHURCH OF MACON, INC
OPERATING ACCOUNT
P O BOX 3296
MACON GA 31205-3296

Date 3/30/12
Primary Account

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XXXXXX1601

ABSOLUTELY FREE BUSINESS CKING

XXXXXX1601 (Continued)

OTHER DEBITS

Date	Description	Amount
3/06	TRANSF TO PAYROLL	1,725.00-
	TR FM OP MB1000/MG350/LB375-GH	
	CONFIRMATION NUMBER 306120773	
3/13	TRANSF TO PAYROLL	1,000.00-
	TRAN FM OPER MB - GH	
	CONFIRMATION NUMBER 313120583	
3/14	MACON WATER AUTHWATER BILLWEB	45.86-
3/19	CHURCH MUTUAL IN7155365577CCD	388.05-
	Z1051385910	
3/19	AOL* SERVICE 03-12	21.95-
3/20	TRANSF TO PAYROLL	1,000.00-
	FROM OPER MB - GH	
	CONFIRMATION NUMBER 320120497	
3/27	TRANSF TO PAYROLL	1,000.00-
	PAY MB - GH	
	CONFIRMATION NUMBER 327120513	
3/29	PRIMERICA LIFE INS. PREM PPD	227.32-

CHECKS IN NUMBER ORDER

Date	Check No	Amount	Date	Check No	Amount
3/01	600	445.20	3/21	606*	55.00
3/05	601	200.00	3/20	607	32.75
3/06	602	29.52	3/22	608	174.46
3/07	603	1,079.72	3/23	610*	100.00
3/19	604	99.39	3/29	611	97.60

* Denotes missing check numbers

DAILY BALANCE INFORMATION

Date	Balance	Date	Balance	Date	Balance
3/01	352.36	3/05	3,283.36	3/06	1,528.84



**Capital City
Bank**

e|statement

Capital City Bank OnLine

CORNERSTONE BAPTIST CHURCH OF MACON, INC
OPERATING ACCOUNT
P O BOX 3296
MACON GA 31205-3296

Date 3/30/12
Primary Account

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ABSOLUTELY FREE BUSINESS CKING

XXXXXX1601 (Continued)

DAILY BALANCE INFORMATION

Date	Balance	Date	Balance	Date	Balance
3/07	449.12	3/19	2,060.71	3/23	948.50
3/12	2,076.12	3/20	1,027.96	3/26	2,063.50
3/13	1,076.12	3/21	972.96	3/27	1,063.50
3/14	1,030.26	3/22	1,048.50	3/29	738.58

-----END OF STATEMENT-----

DEPOSIT TICKET
CORNERSTONE BAPTIST CHURCH OF MACON, INC
OPERATING ACCOUNT PH. 478-781-2782
P.O. BOX 5200
MACON, GA 31205-0200

DATE: 3/4/12
CHECKS OR TOTAL FROM OTHER DEPOSITS: 155.00
CASH: 2976.00
TOTAL: 3131.00

Capital City Bank
MACON, GEORGIA

DEPOSIT: 3131.00

Deposit Date: 03/05 Amount: \$3,131.00

DEPOSIT TICKET
CORNERSTONE BAPTIST CHURCH OF MACON, INC
OPERATING ACCOUNT PH. 478-781-2782
P.O. BOX 5200
MACON, GA 31205-0200

DATE: 3/11/12
CHECKS OR TOTAL FROM OTHER DEPOSITS: 95.00
CASH: 1532.00
TOTAL: 1627.00

Capital City Bank
MACON, GEORGIA

DEPOSIT: 1627.00

Deposit Date: 03/12 Amount: \$1,627.00

DEPOSIT TICKET
CORNERSTONE BAPTIST CHURCH OF MACON, INC
OPERATING ACCOUNT PH. 478-781-2782
P.O. BOX 5200
MACON, GA 31205-0200

DATE: 3/18/12
CHECKS OR TOTAL FROM OTHER DEPOSITS: 323.00
CASH: 1216.84
TOTAL: 1539.84

Capital City Bank
MACON, GEORGIA

DEPOSIT: 1539.84

Deposit Date: 03/19 Amount: \$1,539.84

DEPOSIT TICKET
CORNERSTONE BAPTIST CHURCH OF MACON, INC
OPERATING ACCOUNT PH. 478-781-2782
P.O. BOX 5200
MACON, GA 31205-0200

DATE: 3/21/2012
CHECKS OR TOTAL FROM OTHER DEPOSITS: 250.00
CASH: 250.00
TOTAL: 500.00

Capital City Bank
MACON, GEORGIA

DEPOSIT: 500.00

Deposit Date: 03/22 Amount: \$250.00

DEPOSIT TICKET
CORNERSTONE BAPTIST CHURCH OF MACON, INC
OPERATING ACCOUNT PH. 478-781-2782
P.O. BOX 5200
MACON, GA 31205-0200

DATE: 3/25/12
CHECKS OR TOTAL FROM OTHER DEPOSITS: 45.00
CASH: 1070.00
TOTAL: 1115.00

Capital City Bank
MACON, GEORGIA

DEPOSIT: 1115.00

Deposit Date: 03/26 Amount: \$1,115.00

CHECK
CORNERSTONE BAPTIST CHURCH OF MACON, INC
OPERATING ACCOUNT PH. 478-781-2782
P.O. BOX 5200
MACON, GA 31205-0200

DATE: 2/26/12
Pay to the Order of: SB5
Four hundred forty five and 00/100 \$445.00
Capital City Bank
MACON, GEORGIA

Check 600 Date: 03/01 Amount: \$445.20

CHECK
CORNERSTONE BAPTIST CHURCH OF MACON, INC
OPERATING ACCOUNT PH. 478-781-2782
P.O. BOX 5200
MACON, GA 31205-0200

DATE: 2/26/12
Pay to the Order of: Wayne Hutchins
Two hundred and 00/100 \$200.00
Capital City Bank
MACON, GEORGIA

Check 601 Date: 03/05 Amount: \$200.00

CHECK
CORNERSTONE BAPTIST CHURCH OF MACON, INC
OPERATING ACCOUNT PH. 478-781-2782
P.O. BOX 5200
MACON, GA 31205-0200

DATE: 3/4/12
Pay to the Order of: Patsy Wiggins
Twenty nine and 62/100 \$29.62
Capital City Bank
MACON, GEORGIA

Check 602 Date: 03/06 Amount: \$29.52

CHECK
CORNERSTONE BAPTIST CHURCH OF MACON, INC
OPERATING ACCOUNT PH. 478-781-2782
P.O. BOX 5200
MACON, GA 31205-0200

DATE: 3/4/12
Pay to the Order of: Southern Rivers Energy
One thousand seventy nine and 73/100 \$1079.73
Capital City Bank
MACON, GEORGIA

Check 603 Date: 03/07 Amount: \$1,079.72

CHECK
CORNERSTONE BAPTIST CHURCH OF MACON, INC
OPERATING ACCOUNT PH. 478-781-2782
P.O. BOX 5200
MACON, GA 31205-0200

DATE: 3/11/12
Pay to the Order of: Advanced Disposal
Twenty nine and 34/100 \$29.34
Capital City Bank
MACON, GEORGIA

Check 604 Date: 03/16 Amount: \$29.29

CHECK
CORNERSTONE BAPTIST CHURCH OF MACON, INC
OPERATING ACCOUNT PH. 478-781-2782
P.O. BOX 5200
MACON, GA 31205-0200

DATE: 3/16/12
Pay to the Order of: The Leaky's
Fifty five and 00/100 \$55.00
Capital City Bank
MACON, GEORGIA

Check 608 Date: 03/21 Amount: \$55.00

CHECK
CORNERSTONE BAPTIST CHURCH OF MACON, INC
OPERATING ACCOUNT PH. 478-781-2782
P.O. BOX 5200
MACON, GA 31205-0200

DATE: 3/18/12
Pay to the Order of: Mike Blaylock
Thirty three and 05/100 \$33.25
Capital City Bank
MACON, GEORGIA

Check 607 Date: 03/20 Amount: \$32.75

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

CORNERSTONE BAPTIST CHURCH OF MACON, INC
OPERATING ACCOUNT PH. 478-781-2762
P.O. BOX 3206
MACON, GA 31206-3206

608

3/18/12

Pay to the Order of Cash \$174.46

One hundred seventy four and 46/100 Dollars

Capital City Bank

For Payment to Day C. Hartaway

⑆053100688⑆ ⑆00061160⑆ ⑆0608⑆ ⑆0000017446⑆

Check 608 Date: 03/22 Amount: \$174.46

CORNERSTONE BAPTIST CHURCH OF MACON, INC
OPERATING ACCOUNT PH. 478-781-2762
P.O. BOX 3206
MACON, GA 31206-3206

610

3/24/12

Pay to the Order of Mike Elington \$100.00

One hundred and 00/100 Dollars

Capital City Bank

For Payment to Day C. Hartaway

⑆053100688⑆ ⑆00061160⑆ ⑆0610⑆ ⑆0000010000⑆

Check 610 Date: 03/23 Amount: \$100.00

CORNERSTONE BAPTIST CHURCH OF MACON, INC
OPERATING ACCOUNT PH. 478-781-2762
P.O. BOX 3206
MACON, GA 31206-3206

611

3/25/12

Pay to the Order of He Dept of Revenue \$97.60

Ninety seven and 60/100 Dollars

Capital City Bank

For Payment to Day C. Hartaway

⑆053100688⑆ ⑆00061160⑆ ⑆0611⑆ ⑆0000009760⑆

Check 611 Date: 03/28 Amount: \$97.60

[REDACTED]

[REDACTED]

[REDACTED]

**Member
FDIC**

[illegible]

MONTH _____ 20____

BANK BALANCE SHOWN
ON THIS STATEMENT \$ _____

ADD (+) DEPOSITS \$ _____
NOT CREDITED ON
THIS STATEMENT (IF ANY) \$ _____

TOTAL \$ _____

SUBTRACT (-)
CHECKS OUTSTANDING \$ _____

BALANCE \$ _____

**BALANCE SHOULD AGREE WITH YOUR CHECKBOOK
BALANCE AFTER DEDUCTING SERVICE CHARGES,
AUTOMATIC TELLER WITHDRAWALS AND OTHER BANK
CHARGES SHOWN ON THIS STATEMENT.**

IN CASE OF ERRORS OR QUESTIONS ABOUT YOUR ELECTRONIC TRANSFERS: Telephons us Monday thru Friday between 9 a.m. and 5 p.m. eastern time using the telephone number shown on the front of the statement, or write us as soon as you can, if you think your statement or receipt is wrong or if you need more information about a transfer listed on the statement or receipt. We must hear from you no later than 60 days after we sent the FIRST statement on which the problem or error appeared.

- 1) Tell us your name and account number.
- 2) Describe the error or the transfer you are unsure about, and explain as clearly as you can if you believe it is an error or why you need more information.
- 3) Tell us the dollar amount of the suspected error.

If you tell us orally, we may require that you send us your complaint or question in writing within 10 business days.

We will determine whether an error occurred within 10 business days after we hear from you and will correct any error promptly. If we need more time, however, we may take up to 45 days to investigate your complaint or question. If we decide to do this, we will provisionally credit your account within 10 business days for the amount you think is in error, so that you will have the use of the money during the time it takes us to complete our investigation. If we ask you to put your complaint or question in writing and we do not receive it within 10 business days, we may not credit your account.

For errors involving new accounts (one within 30 days after initial deposit), transactions that originate at a point-of-sale terminal, or foreign-initiated transactions, we may take up to 90 days to investigate your complaint or question. Also, for new accounts, we may take up to 20 business days to credit your account for the amount you think is in error.

We will tell you the results within three business days after completing our investigation. If we decide that there was no error, we will send you a written explanation. You may ask for copies of the documents that we used in our investigation.

If the error or question does not involve a debit ATM transaction, a debit point-of-sale transaction or other electronic funds transfer, different error notification procedures may apply.

If you think your bill is wrong, or if you need more information about a transaction on your bill, write us on a separate sheet at the address shown on your bill as soon as possible. We must hear from you no later than 60 days after we sent you the first bill on which the error or problem appeared. You can telephone us, but doing so will not preserve your rights.

In your letter, give us the following information:

- 1) Your name and account number.
- 2) Describe the error and explain, if you can, why you believe there is an error. If you need more information, describe the item you are unsure about.
- 3) The dollar amount of the suspected error.

You do not have to pay any amount in question while we are investigating, but you are still obligated to pay the parts of your bill that are not in question. While we investigate your question, we cannot report you as delinquent or take any action to collect the amount you question.

If you have authorized us to automatically pay your bill from your checking or savings account, you can stop payment on any amount you think is wrong by mailing your notice so that we receive it within 3 business days before the automatic payment is scheduled to occur.

This is a summary of your rights; a full statement of your rights and our responsibilities under the Federal Fair Credit Billing Act will be sent to you upon request.

REQUIRED DISCLOSURES
The periodic statement on the reverse side reflects the activity for this account posted during the previous billing period.

The daily periodic rate and annual percentage rate disclosed herein may vary.

Revised 06/2008

- 1) Disclosures for Cash Advances.** We compute the FINANCE CHARGE on your account by applying the daily periodic rate to the daily balance of your account. To get the daily balance, we take the beginning balance of your account each day, add any new advances and fees, and subtract any payments or credits. This gives us the daily balance.
- 2) How Your Payments Are Applied.** Unless otherwise agreed or required by applicable law, payments and other credits will be applied first to FINANCE CHARGES; then to unpaid principal; then to any voluntary credit life and disability insurance premiums; and then to late charges and other charges.

The accountholder may pay the entire balance at any time.

What is a substitute check? To make check processing faster, federal law permits banks to replace original checks with "substitute checks." These checks are similar in size to original checks with a slightly reduced image of the front and back of the original check. The front of a substitute check states: "This is a legal copy of your check. You can use it the same way you would use the original check." You may use a substitute check as proof of payment just like the original check.

Some or all of the checks that you receive back from us may be substitute checks. This notice describes rights you have when you receive substitute checks from us. The rights in this notice do not apply to original checks or to electronic debits to your account. However, you have rights under other law with respect to those transactions.

What are my rights regarding substitute checks? In certain cases, federal law provides a special procedure that allows you to request a refund for losses you suffer if a substitute check is posted to your account (for example, if you think that we withdrew the wrong amount from your account or that we withdrew money from your account more than once for the same check). The losses you may attempt to recover under this procedure may include the amount that was withdrawn from your account and fees that were charged as a result of the withdrawal (for example, bounced check fees).

The amount of your refund under this procedure is limited to the amount of your loss or the amount of the substitute check, whichever is less. You also are entitled to interest on the amount of your refund if your account is an interest-bearing account. If your loss exceeds the amount of the substitute check, you may be able to recover additional amounts under other law.

If you use this procedure, you may receive up to \$2,500 of your refund (plus interest if your account earns interest) within 10 business days after we receive your claim and the remainder of your refund (plus interest if your account earns interest) not later than 45 calendar days after we received your claim.

We may reverse the refund (including any interest on the refund) if we later are able to demonstrate that the substitute check was correctly posted to your account.

How do I make a claim for a refund? If you have suffered a loss relating to a substitute check that you received and that was posted to your account, please contact us using the information on the front of the first page of this statement. You must contact us within 40 calendar days of the date that we mailed (or otherwise delivered by a means to which you agreed) the substitute check in question or the account statement showing that the substitute check was posted to your account, whichever is later. We will extend this time period if you were not able to make a timely claim because of extraordinary circumstances.

Your claim must include -

- A description of why you have suffered a loss (for example, you think the amount withdrawn was incorrect);
- An estimate of the amount of your loss;
- An explanation of why the substitute check you received is insufficient to confirm that you suffered a loss; and
- A copy of the substitute checks and/or the following information to help us identify the substitute check: the check number, the name of the person to whom you wrote the check, the amount of the check.

Making a Claim for an Expedited Refund – Please make your claim (as explained above) by calling us, by writing to us, or by e-mailing us at the numbers and address listed below:

Capital City Bank, P.O. Box 900, Tallahassee, FL 32302-0900
850.402.7500 • Toll-Free 888.671.0400 • www.ccba.com



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Capital City Bank OnLine

A Home Equity Line of Credit provides the money needed when insurance or emergency funds aren't enough to handle the unexpected. Apply today and, once approved, access this cash-up to available credit limit-when you need it most. www.ccbg.com

CORNERSTONE BAPTIST CHURCH OF MACON, INC
PAYROLL ACCOUNT
P O BOX 3296
MACON GA 31205-3296

Date 3/30/12
Primary Account

Page 1
XXXXXX2401

CHECKING ACCOUNT

ABSOLUTELY FREE BUSINESS CKING	Images	6
Account Number XXXXXX2401	Statement Dates	3/01/12 thru 4/01/12
Previous Balance 420.01	Days in this Statement Period	32
4 Deposits/Credits 4,725.00	Avg Ledger Balance	465.32
6 Checks/Debits 4,725.00	Avg Collected Balance	465.32
Service Charges .00		
Interest Paid .00		
Ending Balance 420.01		

DEPOSITS AND OTHER CREDITS

Date	Description	Amount
3/06	TRSF FROM OPERATING	1,725.00
	TR FM OP MB1000/MG350/LB375-GH	
	CONFIRMATION NUMBER 306120773	
3/13	TRSF FROM OPERATING	1,000.00
	TRAN FM OPER MB - GH	
	CONFIRMATION NUMBER 313120583	
3/20	TRSF FROM OPERATING	1,000.00
	FROM OPER MB - GH	
	CONFIRMATION NUMBER 320120497	
3/27	TRSF FROM OPERATING	1,000.00
	PAY MB - GH	



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Capital City Bank OnLine

CORNERSTONE BAPTIST CHURCH OF MACON, INC
PAYROLL ACCOUNT
P O BOX 3296
MACON GA 31205-3296

Date 3/30/12
Primary Account

Page 2
XXXXXX2401

ABSOLUTELY FREE BUSINESS CKING

XXXXXX2401 (Continued)

DEPOSITS AND OTHER CREDITS

Date	Description	Amount
	CONFIRMATION NUMBER 327120513	

CHECKS IN NUMBER ORDER

Date	Check No	Amount	Date	Check No	Amount
3/08	564	350.00	3/13	567	1,000.00
3/08	565	375.00	3/20	568	1,000.00
3/06	566	1,000.00	3/27	569	1,000.00

* Denotes missing check numbers

DAILY BALANCE INFORMATION

Date	Balance	Date	Balance	Date	Balance
3/01	420.01	3/08	420.01	3/20	420.01
3/06	1,145.01	3/13	420.01	3/27	420.01

-----END OF STATEMENT-----

CORNERSTONE BAPTIST CHURCH OF MACON, INC
PAYROLL ACCOUNT PH. 478-781-2762
P.O. BOX 3206
MACON, GA 31206-3206

3/4/12 DATE

Pay to the Order of Martine Hales \$350.00
Three hundred fifty & 00/100 Dollars

Capital City Bank
HARTLEY BRIDGE/SHAWNEE RD OFFICE
MACON, GEORGIA

For Darryl C. Hattaway

⑆063100688⑆380081240⑆ 0564

Check 564 Date: 03/08 Amount: \$350.00

CORNERSTONE BAPTIST CHURCH OF MACON, INC
PAYROLL ACCOUNT PH. 478-781-2762
P.O. BOX 3206
MACON, GA 31206-3206

3/4/12 DATE

Pay to the Order of Lynne Barnes \$375.00
Three hundred seventy five & 00/100 Dollars

Capital City Bank
HARTLEY BRIDGE/SHAWNEE RD OFFICE
MACON, GEORGIA

For Darryl C. Hattaway

⑆063100688⑆380081240⑆ 0565

Cashed Check 565 Date: 03/08 Amount: \$375.00

CORNERSTONE BAPTIST CHURCH OF MACON, INC
PAYROLL ACCOUNT PH. 478-781-2762
P.O. BOX 3206
MACON, GA 31206-3206

3/4/12 DATE

Pay to the Order of Mike Bliggand \$1000.00
One thousand & 00/100 Dollars

Capital City Bank
HARTLEY BRIDGE/SHAWNEE RD OFFICE
MACON, GEORGIA

For Darryl C. Hattaway

⑆063100688⑆380081240⑆ 0566

Check 566 Date: 03/06 Amount: \$1,000.00

CORNERSTONE BAPTIST CHURCH OF MACON, INC
PAYROLL ACCOUNT PH. 478-781-2762
P.O. BOX 3206
MACON, GA 31206-3206

3/11/12 DATE

Pay to the Order of Mike Bliggand \$1000.00
One thousand & 00/100 Dollars

Capital City Bank
HARTLEY BRIDGE/SHAWNEE RD OFFICE
MACON, GEORGIA

For Darryl C. Hattaway

⑆063100688⑆380081240⑆ 0567

Check 567 Date: 03/13 Amount: \$1,000.00

CORNERSTONE BAPTIST CHURCH OF MACON, INC
PAYROLL ACCOUNT PH. 478-781-2762
P.O. BOX 3206
MACON, GA 31206-3206

3/15/12 DATE

Pay to the Order of Mike Bliggand \$1000.00
One thousand & 00/100 Dollars

Capital City Bank
HARTLEY BRIDGE/SHAWNEE RD OFFICE
MACON, GEORGIA

For Darryl C. Hattaway

⑆063100688⑆380081240⑆ 0568

Check 568 Date: 03/20 Amount: \$1,000.00

CORNERSTONE BAPTIST CHURCH OF MACON, INC
PAYROLL ACCOUNT PH. 478-781-2762
P.O. BOX 3206
MACON, GA 31206-3206

3/15/12 DATE

Pay to the Order of Mike Bliggand \$1000.00
One thousand & 00/100 Dollars

Capital City Bank
HARTLEY BRIDGE/SHAWNEE RD OFFICE
MACON, GEORGIA

For Darryl C. Hattaway

⑆063100688⑆380081240⑆ 0569

Check 569 Date: 03/27 Amount: \$1,000.00

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

1. **Write the amount of your check.** —
 A description of what you have withdrawn was included.
 An estimate of the amount of your loss.
 A copy of the questionnaire that you received in connection with your withdrawal request.
 A copy of the questionnaire that you received in connection with your withdrawal request.
 The name of the bank to whom you wrote the check, the amount of the check.
 2. **Marking a Claim for an Expedited Refund** — Please make your claim (as explained above) by calling us, by writing to us, or by e-mailing us at the numbers and address listed below)

We received your claim. We may reverse the refund (including any interest on the refund) if we later are able to demonstrate that the suspicious check was correctly posted to your account.

How do I make a claim? If you have submitted a claim relating to a suspicious check that you received and that was posted to your account, please contact us using the information on the front of the first page of this statement. You must contact us within 40 calendar days of the date that we mailed (or otherwise delivered by a means to which you agreed) the suspicious check in question to the account statement showing the deposit. We will extend the time period if you provide evidence to make a timely claim because of extraordinary circumstances.

With the amount of your refund under this provision limited to the amount of your loss or the amount of the substituted check, withdrawal of the substituted check, without regard to the amount of the substituted check, you may receive up to \$2,500 of your refund (plus interest) if you use this provision. If you do not use this provision, you may receive an amount in excess of \$2,500 of your refund (plus interest) if you use the substituted check. You may also be able to receive more additional amounts in excess of \$2,500 of your refund (plus interest) if you use the substituted check. For example, if you received a substituted check (see).

[illegible]

SUBSTITUTE CHECKS AND YOUR RIGHTS

What is a substitute check? To make check processing faster, federal law permits banks to replace original checks with "substitute checks". These checks are similar in size to original checks, but a slightly reduced image of the front and back of the original check. The front of a substitute check is a legal copy of your check. You can use it the same way you would use the original check. You may use a substitute check as proof of payment just like the original check.

Some or all of the checks that you receive back from us may be substitute checks. This notice describes how you may have them or to decline them or to decline checks or to decline them. However, you have rights that do not apply to original checks or to electronic debits to your account. The rights in this notice are not intended to limit your rights to your account. However, you have rights that do not apply to original checks or to electronic debits to your account. The rights in this notice are not intended to limit your rights to your account.

2) **Disbursements for Cash Advances.** We compute the FINANCE CHARGES on your account by applying the daily periodic rate to the daily balance on your account. To get the daily balance, we take the beginning balance of your account each day, add any new advances and fees, and subtract any payments or credits. This gives us the daily balance.


3) **How Your Payments are Applied.** Unless otherwise agreed or required by applicable law, payments and other credits will be applied first to FINANCE CHARGES, then to unpaid charges and other charges. The account holder may pay the entire balance at any time.

BALANCE SHOULD AGREE WITH YOUR CHECKBOOK	
BALANCE AFTER DEPOSITING SERVICE CHARGES,	
AUTOMATIC TELLER WITHDRAWALS AND OTHER BANK	
CHARGES SHOWN ON THIS STATEMENT.	
ACE WITH FEDERAL AND STATE BANKING REQUIREMENTS	
FRIDAY, HOLIDAYS ARE NOT INCLUDED.	

	\$	BALANCE	
	\$	SUBTRACT (-) CHECKS OUTSTANDING	
	\$	TOTAL	

	\$
ADD (+) DEPOSITS NOT CREDITED ON THIS STATEMENT (IF ANY)	\$
	\$
	\$
	\$

Member F D I C

 FEDERAL RESERVE BANK OF NEW YORK

MONTH _____

BANK BALANCE SHOWN _____

\$ _____ ON THIS STATEMENT

CONCLUSIONS

PAGE 1



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Capital City Bank OnLine

A Home Equity Line of Credit provides the money needed when insurance or emergency funds aren't enough to handle the unexpected. Apply today and, once approved, access this cash-up to available credit limit-when you need it most. www.ccbg.com

CORNERSTONE BAPTIST CHURCH OF MACON, INC
TAX ACCOUNT
P O BOX 3296
MACON GA 31205-3296

Date 3/30/12
Primary Account

Page 1
XXXXXX3201

CHECKING ACCOUNT

ABSOLUTELY FREE BUSINESS CKING	Images	0
Account Number XXXXX3201	Statement Dates	3/01/12 thru 4/01/12
Previous Balance 28.40	Days in this Statement Period	32
Deposits/Credits .00	Avg Ledger Balance	28.40
Checks/Debits .00	Avg Collected Balance	28.40
Service Charges .00		
Interest Paid .00		
Ending Balance 28.40		

DAILY BALANCE INFORMATION

Date	Balance
3/01	28.40

-----END OF STATEMENT-----

**Member
FDIC**

MONTH _____ 20____

BANK BALANCE SHOWN ON THIS STATEMENT	\$	_____
ADD (+) DEPOSITS NOT CREDITED ON THIS STATEMENT (IF ANY)	\$	_____
	\$	_____
	\$	_____
	\$	_____
TOTAL	\$	_____
SUBTRACT (-) CHECKS OUTSTANDING	\$	_____
BALANCE	\$	_____

THE FOLLOWING INSTRUCTIONS ARE PUBLISHED IN COMPLIANCE WITH FEDERAL AND STATE BANKING REQUIREMENTS
OUR BUSINESS DAYS ARE MONDAY THROUGH FRIDAY. HOLIDAYS ARE NOT INCLUDED.

1) **Disclosures for Cash Advances.** We compute the FINANCE CHARGE on your account by applying the daily periodic rate to the daily balance of your account. To get the daily balance, we take the beginning balance of your account each day, add any new advances and fees, and subtract any payments or credits. This gives us the daily balance.

- 2) **How Your Payments Are Applied.** Unless otherwise agreed or required by applicable law, payments and other credits will be applied first to FINANCE CHARGES; then to unpaid principal; then to any voluntary credit life and disability insurance premiums; and then to late charges and other charges.

The accountholder may pay the entire balance at any time.

SUBSTITUTE CHECKS AND YOUR RIGHTS

What is a substitute check? To make check processing faster, federal law permits banks to replace original checks with "substitute checks". These checks are similar in size to original checks with a slightly reduced image of the front and back of the original check. The front of a substitute check states: "This is a legal copy of your check. You can use it the same way you would use the original check." You may use a substitute check as proof of payment just like the original check.

Customer all of the checks that you receive from us may be substitute checks. This notice describes rights you have when you receive substitute checks from us. The rights in this notice do not apply to original checks or to electronic debits to your account. However, you have rights under other law with respect to those transactions.

What are my rights regarding substitute checks? In certain cases, federal law provides a special procedure that allows you to request a refund for losses you suffer if a substitute check is posted to your account (for example, if you think that we withdrew the wrong amount from your account or that we withdrew money from your account more than once for the same check). The losses you may attempt to recover under this procedure may include the amount that was withdrawn from your account and fees that were charged as a result of the withdrawal (for example, bounced check fees).

The amount of your refund under this procedure is limited to the amount of your loss or the amount of the substitute check, whichever is less. You also are entitled to interest on the amount of your refund if your account is an interest-bearing account. If your loss exceeds the amount of the substitute check, you may be able to recover additional amounts under other law.

If you use this procedure, you may receive up to \$2,500 of your refund (plus interest if your account earns interest) within 10 business days after we receive your claim and the remainder of your refund (plus interest if your account earns interest) not later than 45 calendar days after we received your claim.

We may reverse the refund (including any interest on the refund) if we later are able to demonstrate that the substitute check was correctly posted to your account.

How do I make a claim for a refund? If you have suffered a loss relating to a substitute check that you received and that was posted to your account, please contact us using the information on the front of the first page of this statement. You must contact us within 40 calendar days of the date that we mailed (or otherwise delivered by a means to which you agreed) the substitute check in question or the account statement showing that the substitute check was posted to your account, whichever is later. We will extend this time period if you were not able to make a timely claim because of extraordinary circumstances.

- Your claim must include —**
- A description of why you have suffered a loss (for example, you think the amount withdrawn was incorrect);
 - An estimate of the amount of your loss;
 - An explanation of why the substitute check you received is insufficient to confirm that you suffered a loss; and
 - A copy of the substitute checks and/or the following information to help us identify the substitute check: the check number, the name of the person to whom you wrote the check, the amount of the check.

Making a Claim for an Expedited Refund – Please make your claim (as explained above) by calling us, by writing to us, or by e-mailing us at the numbers and address listed below:

Capital City Bank, P.O. Box 900, Tallahassee, FL 32302-0900
850.402.7500 • Toll-Free 888.671.0400 • www.ccbn.com

850.402.7500 • Toll-Free 888.671.0400 • www.echb.com

The periodic statement on the reverse side reflects the activity for this account posted during the previous billing period.

The daily periodic rate and annual percentage rate disclosed herein may vary.

CERTIFICATE OF SERVICE

This is to certify that I have this day served a copy of the
DEBTOR'S MONTHLY OPERATING REPORT
upon the following:

Elizabeth Hardy, Esq.
440 MLK Jr. Blvd., Suite 302
Macon GA 31201

via the court's electronic notification system this 6th day of September, 2012.


KATHY ENGLISH